## Community Bank

RAYMORE • PECULIAR • HARRISONVILLE

#### **BUSINESS LOAN APPLICATION**

#### **Community Bank**

#### **Makes Business Banking Easier**

#### **INSTRUCTIONS:**

- 1. Please complete, sign and return the loan application.
- 2. Please provide the following items from each partner, owner of 20% or more of the business and any guarantor(s) or principal(s) as deemed appropriate:
  - Current Personal Financial Statement (form attached)
  - ➤ Copies of Personal Tax Return for the last 2 (two) years including W 2's and Schedule K 1's as applicable.
  - > Copies of Business Tax Return for the last 2 (two) years
  - Year-end Business Financial Statement from the last 2 (two) years
  - Current year-to-date Profit & Loss and Balance Sheet
  - Current Aging Report on Receivables
  - > Business plan and projections (if business less than 2 years old)

#### Questions:

Please feel free to contact a Loan Officer if you have any questions regarding the application process at 816.322.2100.

#### **THANK YOU!**

Thank you for considering Community Bank to assist you with your financing needs.





BUSINESS INFORMATION	CREDIT F	REQUEST PROFILE	
Business Name	How can we h	elp How much do you For ho	w long
Your Name	you today?		er of years) Specify purpose/s of loan
Position	☐ Line of Cred	it \$	
Street Address	∐ Ierm Loan	\$	
City	I Tibal Estate	Loan \$	
State Zip County	Letter of Cre	dit \$ropose to use for collateral?	
Mailing Address	- Accounts Re		☐ Deposits/Securities
City	☐ Inventory		I Estate
State Zip County	Other (speci	fy)	
Business Phone			
Is your business a:	attach a copy of policy. If deposits	f the purchase contract and/or title	l estate will be used as collateral, please insurance commitment or title insurance please attach a copy of the certificate.
Sole Proprietorship Limited Liability Company	l r		
☐ General Partnership ☐ C Corporation ☐ Limited Partnership ☐ S Corporation		real estate loan applications on	
-	Present Owne	1	
☐ Professional Corporation ☐ Other (specify)  Registered in?	City	ionState Zin	County
☐ Missouri ☐ Kansas ☐ Other (specify)	Dimensions of	plot Dimer	nsions of building
What is your Federal Tax Identification #	Number of sto	riesTvpe	of construction
Tell us about your business:	Usage of build	ing Zonin	g classification
How long has your business been established?	Percent of pro	perty: Owner occupied	% Rented%
How long has your business been under current management?	Is any part of t	he property used as a residence	☐ Yes ☐ No
Type of Business	Property was I	ast sold on: month	20 This sale price was \$
☐ Retail ☐ Wholesale ☐ Manufacturer ☐ Service	Please provide	us with the following support infor	mation:
Please provide description below:			Phone:
		,	11010
	_ Insurance Age	nt	
How did you hear about Community Bank's program?	Address		
☐ Newspaper ☐ CPA ☐ Letter ☐ Other	_   City	State	Zip
FINANCIAL PROFILE			•
Drimany hanks			
Primary bank:  1. Does your business owe any taxes from prior years?  Yes			
2. Is the business an endorser, guarantor or co-maker for obligations in	INO IT YES, NOV	/ much \$	***
3. Is the business a party to any claim or lawsuit?  Yes No			
4. Are there any delinquent FICA or sales taxes?		is the business ever declared ban	
	0, 116	ve any principals ever declared b	ankiupicy? res No
PERSONAL PROFILE			
Please list the following information on each owner of the business (All partners and owners of 20% or more will be asked to guarantee the	(Attach separate sch	edule if necessary.)	
	•		4
I. IVAIVIC	% OF OWNERSHIP	SOCIAL SECURITY # PE	RSONAL NET WORTH cluding value of business)
HOME ADDRESS: STREET	CITY	STATE	
2. NAME	% OF OWNERSHIP		RSONAL NET WORTH
HOME ADDRESS: STREET	CITY	(Exc	cluding value of business)
3. NAME	% OF OWNERSHIP	SOCIAL SECURITY# PE	RSONAL NET WORTH
HOME ADDRESS: STREET	CITY	(Exc	cluding value of business)
4. NAME		STATE	
		(Exc	RSONAL NET WORTH cluding value of business)
HOME ADDRESS: STREET	CITY	STATE	ZIP
AGREEMENT			
Your Authorization to Release Information: Applicant(s) hereby certify that	it all of the statements	above and on any other documents	
provided to the Bank to consider this extension of credit are true and comm	plete as of the date div	en Annlicant/e) authorize Rank to	FOR INTERNAL BANK USE ONLY
verify all of the information given, to obtain a credit report or any other verific ligation as the Bank deems appropriate. Applicant(s) agree to notify the Ba	nk promotly of any adv	area change in their financial con	Officer name: Number:
dition. If the business is a corporation or partnership, all owners/principals r	nust sign and include t	heir corporate/partnership title.	Division de
X			Phone number:
	TITLE	DATE	
X			Fax number:
	TITLE	DATE	Proposition of the state of the
X 3. SIGNATURE T	TILE	DATE	Branch number:
Or Original transfer District			

#### PERSONAL FINANCIAL STATEMENT (Type or Print)

Submitted to: (BANK NAME) COMMUNITY BANK OF RAYMORE

#### IMPORTANT: Read these directions before completing this Statement

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Section 1, 3 and 4. If you own an asset jointly with another person, show the aggregate market value and debt on the reverse side and include only your prorated share of each on this side.
- If you are applying for joint credit with another person, complete all Sections and provide information in Section 2 about the joint applicant, include all individuals as well as joint assets, liabilities, income, etc. in Sections 3 and 4. In lieu of this, the joint application may complete a separate personal financial statement and the applications may be submitted together.
- If you are applying for individual credit but are relying on the income from alimony.

Income

- child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections. Provide information in Section 2 about the person on whose alimony, support, or maintenance payments or income or assets you are relying. Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as basis for repaying this obligation.
- If this statement relates to your individual guaranty of the indebtedness of other person(s), firm(s), or corporation(s), complete Section 1, 3 and 4, and include your interests in jointly held assets and related liabilities as described in the first instruction above. If it is to be a joint guaranty, complete it as described in the second instruction above.

Contingent Liabilities

	. but are relying on the are				•	
SECTION 1 - INDIVIDUAL IN	IFORMATION		SEC	TION 2 - OTHER PARTY	INFORMATION	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Name			Name			1,100
Address			Addre	SS	· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	/ tudio			
City, State & Zip		<del></del>	City S	tate & Zip		
Social Security #	Date of	Rinth	<del></del>	Security #	Date of	Ridh
Position or occupation	54.0 (			on or occupation	Date of	
Business name	<del></del>		<del> </del>	ess name		
Business address				ess address		
City, State & Zip			City S	tate & Zip		<del></del>
Length of employment			<del> </del>	of employment		
Res. phone ( )	Bus. phone ( )		<del></del>		Bus, phone ( )	***************************************
Housing Own Rent Other. A		ears, months	<del></del>	ng Own Rent Other. At p		ears, months
			1 11000	ig Comit Citter Const. At	prosont address: ye	outo, morans
SECTION 3 - STATEMENT C	F FINANCIAL CO	NOITION				
Statement of Financial Condition as of			20			
ASSETS (Do not include assets of doubt	ful value)	In dollars (omit cents)		LIABILITIES		In dollars (omit cents)
Cash on hand and in this bank			Notes	payable to banks - see Schedule E		
Cash in other banks			Notes	payable to other institutions - see Sci	hedule E	
U.S. Govt. & marketable securities - see S	Schedule A		Due to	brokers		
Non-marketable securities - see Schedule	В		Amour	nts payable to others - secured		
Securities in margin accounts - see Sched	lule A		Amour	nts payable to others - unsecured	***************************************	
Real Estate see Schedule C				nts and bills due		
Restricted, stocks - see Schedule A			Unpaid	l income tax		
Accounts, loans, and notes receivable			Other	unpaid taxes and interest		
Automobiles			Real e	state mortgages payable - see Scheo	fule C & E	
Other personal property			<del> </del>	debts (car payments, credit cards, etc	<del></del>	
Cash surrender value - life insurance - see	Schedule D				······································	
Other assets - itemized - see Schedule F	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
					<del></del>	
			Total I	_iabilities		
			Net W	orth		
Total Assets			Total L	iabilities and Net Worth		
OFOTION A ANNUAL INCO			1			L
SECTION 4 - ANNUAL INCO	VIE					
Annual Income For Year Ended20	Annual E	xpenditure		Contingent Liabili	ities	Estimated Amounts
					· · · · · · · · · · · · · · · · · · ·	
Salary, bonuses & commissions \$	Mortgage/rental payment	s \$		Do you have any	Yes No	\$
Dividends & interest	Real estate taxes & asse	ssments		Contingent liabilities (as endorser, co-maker or quarantor?		
Real estate income	Taxes - federal, state & lo			(as endorser, co-maker or guarantor? (in cases? or contracts?)		
Other income	Insurance payments		<del></del>	Involvement in pending legal actions?		
<del> </del>				Other special debt or circumstances?		
(alimony, child support or separate maintenance income need not be	Other contract payments (car payments, charge cards	s, etc.)		Contested income tax tax liens?		
revealed if you do not wish to have it	Alimony, child support ma			If "yes" to any question(s) describe.		}
considered as a basis for repaying this obligation)	Other expenses					
- '						
Total \$		Total \$			Total \$	j

Expenditures

Signature (other party) \_

				Print)										
SCHEDULE A -	U.S. GOV	ERNMENT & MA	RKE	TABLE	SECURI	ΓIES								•••
Number of Shares or Face Value of Bonds		Description					In Name	~ f		Are	e these i	register	ed,	Marke
race value of bolicas		Description					in Name (			pieugi	ea, or ne	eid by o	iners?	Value
			······································			<del></del>						·		
SCHEDULE B -	NON-MAF	RKETABLE SECU	JRITI	ES										
Number of Shares		Description			tr	Name of		Are pledged	these d, or he	registe eld by o	red, others?	Val	lue	Source of Valu
									·····					
SCHEDULE C -	DESIDENI	CES AND OTHE	р рг	·AL EC	TATE (DA		OD MU	IOLLY	(O)4			···		
Address and Type of	NEGISIEN.	DES AND OTHER		% of	T	RHALLY	<del></del>						14	
Property  Residence(s)		Title in Name of	<u> </u>	wnership	Date Acquired	Cost	Mark Valu		Mont Paym		Mortg Amo		M	ortgage aturity
Residence(s)				<del></del>										
Other Other			$\pm$						<del> </del>					
SCHEDULE D -	LIFE INSU	IRANCE CARRIE	ED, II	NCLUE	ING GRO	UP INSU	JRANC	=						
Name of Insurance Comp	nanv	Owner of Policy				ciary and ionship			Face Amoun	.	Poli Loa		Cast	Surrenc Value
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Owner or rolley			neiat	ionamp			Amoun		Loa	115		value
					<u></u>							<del></del>	<del> </del>	
SCHEDULE E - I	BANK AND	OTHER INSTIT	UTIC	DNAL F	RELATION	ISHIPS						*****		-
Name and Addre Creditor	ss of	Original Loan/ Line Amount		Dat	e of Loan	Ma D	turity ate			ured o	r Secure ateral)	d		Amount Owed
							<del></del>							
													ļ	
	RUSINIESS	VENTURES				1								
SCHEDIII F F . F		VILIVIOLILO												
			You	ır % of	Your Position	on/Title in	Total 4	\eeate	T				T	/ears in
SCHEDULE F - E List name and address of any b in which you are a principal	usiness venture	Total Assets Listed in Section 3	You Owr	ır % of nership	Your Position the Bus		Total A of Bus	Assets siness		Line o	f Busine	ess		rears in Susiness
List name and address of any b	usiness venture	Total Assets Listed	You Owr	ır % of nership			Total A of Bus	Assets siness		Line o	f Busine	ess		

\_ Date signed \_



#### **COMMERCIAL LOAN APPLICATION**

CRE	DIT REQUESTED:			
Cred	lit Request		Applicant Only	
			Joint with Co-Applicant	
We i	ntend to apply for j	oint credit:		
Appl	icant		Co-Applicant	
Che	ck Appropriate Box			
	assets and not the	income or a	al credit and are relying on y essets of another person as ted, do not complete the se	the basis for
	child support, or se person as the basis to the extent possib	parate mair for repaym le, providin	al credit, but are relying on in tenance or on the income of nent of the credit requested, g information about the pers ents or income or assets you	r assets of another complete all sections on whose alimony,
	If you are applying and attach joint app	•	dit with another applicant, co	omplete all sections
Mari	tal Status (If individ	ual borrow	/er)	
	Married			
	Unmarried			
	Separated			
Appli	cant	Date	Co-Applicant	Date

## Community **B**ank

RAYMORE . PECULIAR . HARRISONVILLE

# FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product annuity in connection with this extension of credit. FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

1.) My purchase of an insurance product or annuity from you or from affiliates;

#### OR

2.) My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure provided electronically or I have applied by credit by mail, I also acknowledge that you have provided this disclosure to me orally.

Consumer	Date
	÷4*
Consumer	Date

### APPRAISAL NOTICE

	References in the boxes above are for Lender's use on	ly and do not limit the applicability	of this document to any particular loan or item.
Applicant:		Lender:	Community Bank of Raymore Raymore Branch 801 W Foxwood Dr P O Box 200 Raymore, MO 64083
Document Date	<b>9</b> :		
We may order		lue and charge you for th	nis appraisal. We will promptly give you a copy of an
We may order appraisal, even	an appraisal to determine the property's va		nis appraisal. We will promptly give you a copy of an
We may order appraisal, even	an appraisal to determine the property's va if your loan does not close.	our own cost.	nis appraisal. We will promptly give you a copy of an
We may order appraisal, even	an appraisal to determine the property's va if your loan does not close, r an additional appraisal for your own use at y	our own cost.	nis appraisal. We will promptly give you a copy of an
We may order appraisal, even You can pay for By signing below	an appraisal to determine the property's va if your loan does not close, r an additional appraisal for your own use at y	our own cost. Notice.	nis appraisal. We will promptly give you a copy of an

#### **AUTHORIZATION TO RELEASE INFORMATION**

То	Whom	Ιt	May	Concern	
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- 1. I / We have applied for a loan from the Community Bank of Raymore. As part of the application process, the Community Bank of Raymore may verify information contained in my / our application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
- 2. I/We authorize you to provide the Community Bank of Raymore any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income verification, bank verification (i.e., account balances), credit history, copies of income tax returns, and loan payoff.
- 3. A copy or fax copy of the authorization may be deemed to be the equivalent of the original and may be used as a duplicate original.

Your prompt reply to the	Community Bank	of Raymore is	appreciated.
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Borrower	Date	Borrower	Date

PRIVACY ACT NOTICE – This information is to be used by the agency collecting it in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency without your consent as required and permitted by law. You do not have to give us this information, but if you do not, your approval, as a prospective mortgagor may be delayed or rejected. The information requested in this form is authorized by Title 42, U.S.C., 1471 et. Seq., 1921 et. Seq.